10 67 0 62 2
Application or Docket Number
60, 152-10/2

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |  |   |              |                               |                               |                  | SMALL ENTITY TYPE |                     |                        | OTHER THAN<br>OR SMALL ENTITY |                   |                        |
|--|--|---|--------------|-------------------------------|-------------------------------|------------------|-------------------|---------------------|------------------------|-------------------------------|-------------------|------------------------|
| TOTAL CLAIMS   |  |   | 24           |                               |                               |                  |                   | RATE                | FEE                    |                               | RATE              | FEE                    |
| FOR  |  |   | NUMBER FILED |                               | NUMBI                         | ER EXTRA         |                   | BASIC FEE           | 375.00                 | OR                            | BASIC FEE         | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 24 minus 20= |                               | . 4                           |                  |                   | X\$ 9=              |                        | OR                            | X\$18=            | 72                     |
| INDEPENDENT CLAIMS   |  |   | minus 3 =    |                               | * \(\delta\)                  |                  |                   | X42=                |                        | OR                            | X84=              | 252                    |
| MULTIP   | PLE DEPEN  | DENT CLAIM PF                               | RESENT       |                               |                               |                  |                   | +140=               |                        | OR                            | +280=             |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |              |                               |                               |                  | 1                 | TOTAL               |                        | OR                            | TOTAL             | 1074                   |
| 10/13/   | 66 CL  | _   | SMALL        | ENTITY                        | OR                            | OTHER<br>SMALL   |                   |                     |                        |                               |                   |                        |
| AMENDMENTA TO                        |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                  | PRESENT<br>EXTRA |                   | RATE                | ADDI-<br>TIONAL<br>FEE |                               | FATE              | ADDI-<br>TIQNAL<br>FEE |
| Tot  | al   | * /8  | Minus        | ** 0                          | 24.                           | =0               |                   | X\$ 9=              |                        | OR                            | X\$184            |                        |
| Ind  |  | · 3   | Minus        | ***                           | 62                            | 19               |                   | X42=                |                        | OR                            | X84 <del>=</del>  |                        |
| FIF  | AST PRESE  | NTATION OF MI                               | DLIPLE DEP   | ENDEN                         | CLAIM                         |                  | j                 | +140=               |                        | OR                            | +280=             |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |              |                               |                               |                  |                   | TOTAL<br>ADDIT. FEE |                        | OR                            | ADDIT. FEE        |                        |
| AMENDMENT B  |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |              | HIGH<br>NUM<br>PREVI          |                               | PRESENT<br>EXTRA |                   | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE              | ADDI-<br>TIONAL<br>PEE |
| Tot  | tal  | • 18  | Minus        | ** 0                          | 24                            | <b>D</b>         |                   | X\$ 9=              |                        | OR                            | X\$18=            |                        |
| AME  | d pendent  | . 3   | Minus        | ***                           | 6 2                           | 10               | 1                 | X42=                |                        | OR                            | X84=              |                        |
| FIF  | AST PRESE  | NTATION OF MI                               | JUNPLE DEF   | ENDEN                         | 1 CLAIM                       |                  | J                 | +140=               |                        | OR                            | <del>1</del> 280= |                        |
|  |  |   |              |                               |                               |                  | :                 | TOTAL<br>ADDIT: FEE |                        | OR                            | ADDIT, PER        |                        |
|  |  | (Column 1)                                  |              |                               | mn 2)                         | (Column 3        |                   |                     |                        | _                             |                   |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |              | NUA<br>PREV                   | HEST<br>MBER<br>HOUSLY<br>FOR | PRESENT<br>EXTRA |                   | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE              | ADDI-<br>TIONAL<br>FEE |
| To   | tal  | *   | Minus        | **                            |                               | =                |                   | X\$ 9=              |                        | OR                            | X\$18=            |                        |
| AME  | dependent  | *   | Minus        | destrict                      |                               | <u> -</u>        | 4                 | X42=                |                        | OR                            | X84=              |                        |
| FI   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |              |                               |                               |                  |                   | +140=               |                        | OR                            |                   |                        |
| ** If th   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                               |                               |                  |                   |                     |                        |                               |                   |                        |